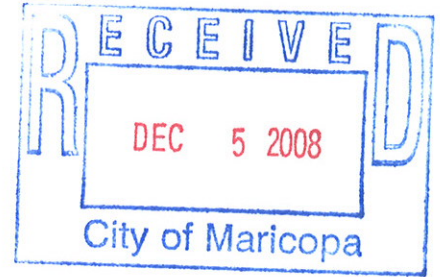




STATE OF ARIZONA
POLITICAL COMMITTEE
TERMINATION STATEMENT

A.R.S. § 16-914; A.R.S. § 16-915.01

FOR OFFICE USE ONLY



1. YES ON QUESTION 5
Full Name of Committee
P.O. Box 446
Address
MARICOPA 85239 PINAL (520) 316-6800
City Zip Code County Phone #

2. Sponsoring Organization or Candidate and Office email address Fax #

3. ID #
80-0250906

SELECT THE BOXES THAT APPLY:

A. • • This is to certify that all contributions received and all expenditures made on behalf of the political committee indicated above have been reported as required by A.R.S. § 16-913. We further certify that the political committee will no longer receive any contributions or make any disbursements, that the committee has no outstanding debts or obligations, and that any surplus monies have been disposed of pursuant to A.R.S. § 16-915.01.

Please mark the appropriate statement below to indicate which campaign finance report states the disposition of any surplus monies.

- • The disposition of surplus monies was submitted on the campaign finance report filed on Dec 5, 2008.
- • The disposition of surplus monies is reported on the attached campaign finance report.

B. • • This committee hereby terminates all activity within the jurisdiction of MARICOPA, AZ, PINAL COUNTY and asserts that the committee intends to remain active in other jurisdictions and that the committee's remaining monies shall be used for activity in other jurisdictions.
(Insert applicable district, town, city, county, or, if out-of-state committee, State of Arizona)

C. • • This committee has transferred the committee's debts and obligations to a subsequent committee.

Please enter the full name and ID# of the committee into which debts and obligations have been transferred.

Name of Committee

ID#

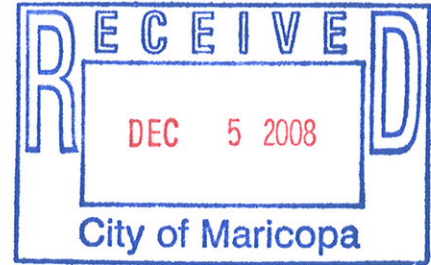
We, KELLY ANDERSON & MYRON TRAFLET, certify under
(Name of Chairman and Treasurer - Printed)
penalty of perjury that this statement of termination pursuant to A.R.S. § 16-914 is true and complete.

Signature of Chairman

Signature of Treasurer

POLITICAL COMMITTEE
CITY/TOWN OF MARICOPA
CAMPAIGN FINANCE REPORT
2008 November Special Election

FOR OFFICE USE ONLY



1. YES ON QUESTION 5
 Full Name of Committee P.O. Box 446
 Address MARICOPA 85239 PINAL (520) 316-6080
 City ZIP Code County Phone
 2. _____
 Sponsoring Organization or Candidate and office

 Name of Candidate and Office Sought (if applicable)

 E-Mail Address Fax #

3A. ID#
80-0250906

4. **REPORTING PERIOD** (Please check appropriate box) **DUE BETWEEN**
- ☐ January 31 Report - For Period of _____ * thru December 31, 2007 January 1, 2008 thru January 31, 2008
- ☐ June 30 Report - For Period of January 1, 2008 thru May 31, 2008 June 1, 2008 thru June 30, 2008
- ☐ Pre-Election Report - For Period of June 1, 2008 thru October 14, 2008 October 15, 2008 thru October 22, 2008
- ☒ Post-Election Report - For Period of October 15, 2008 thru November 24, 2008 November 25, 2008 thru December 4, 2008
- ☐ January 31, Report - For Period of November 25, 2008 thru December 31, ** January 1, ** thru January 31, **

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		<u>0</u>
5b Cash on Hand at the Beginning of this Reporting Period	<u>\$ 5,925.00</u>	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	<u>\$ 17,650.00</u>	<u>\$ 40,924.43</u>
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	<u>\$ 23,575.00</u>	<u>\$ 46,924.43</u>
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		<u>0</u>
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	<u>\$ 23,575.00</u>	<u>\$ 40,924.43</u>
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	<u>0</u>	<u>0</u>

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**This will depend on the year next election is held. The "due between" year will be the year of an election and the date following "December 31" will be the immediately prior year.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Page 2

1. Committee Name: Yes on Question 5
 3. Report covering period from Oct 15, 2008 Thru November 24, 2008

2. ID#
80-0250906

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$25 (Total from Schedule A)	0	0
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)	0	25.00
(c) Political Committees (Total from Schedule B)	17,500.00	40,000.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	17,500.00	40,025.00
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	17,500.00	40,025.00
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)	150.00	899.43
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	17,650.00	40,924.43
QUALIFYING CONTRIBUTION RECEIPTS		
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).		
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	23,425.00	40,025.00
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)	150.00	899.43
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	23,575.00	40,924.43
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	23,575.00	40,924.43
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	0	0
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.		
Myron P. Trafelet Jr		
Type or Print Name of Treasurer	11/24/08	
Signature of Treasurer or Candidate or Designating Individual	Date	

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name Yes on Question 5

2. ID #
80-0250906

3. Report covering period from October 15, 2208 thru November 24, 2008

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
4a.	<div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div>			
b.	<div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div>			
c.	<div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div>			
d.	<div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div>			
e.	<div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div>			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		\$0.00	\$0.00

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL***SCHEDULE A-1**1. Committee Name Yes on Question 52. ID #
80-02509063. Report covering period from October 15, 2008 thru November 24, 2008**4. Aggregate Total of Contributions of \$25 or less**

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
Check Donation	25.00	25.00	
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	\$0.00	6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	\$25.00

*If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.
List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID #
80-0250906

1. Committee Name Yes on Question 5

3. Report covering period from October 15, 2008 thru November 24, 2008

4	CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4a	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	09/10/08	Desert Cedars Equities LLC 5346 East Calle Del Norte Phoenix, AZ 85018	\$0.00	\$5,000.00
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	09/23/08	Rose Law Group 6613 N Scottsdale Road Scottsdale, AZ 85250	\$0.00	\$5,000.00
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	09/23/08	El Dorado Holdings, Inc 426 N 44th Street, Ste 100 Phoenix, AZ 85008	\$0.00	\$5,000.00
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	10/10/08	Pinal Partnership 4415 S. Primrose Dr Gold Canyon, AZ 85218	\$0.00	\$7,500.00
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	10/17/08	Global Water Resources, LLC 21410 N. 19th Avenue, Ste 201 Phoenix, AZ 85027	\$5,000.00	\$5,000.00
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	10/24/08	Orbitel Communications, LLC 21116 N. John Wayne Parkway, Ste B-9 Maricopa, AZ 85239	\$2,500.00	\$2,500.00
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	11/06/08	Land Advisors Organization - Scottsdale 4900 N. Scottsdale Road, Ste. 3000 Scottsdale, AZ 85251	\$5,000.00	\$5,000.00
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
	11/12/08	Arizona Retail Advisors LLC 7025 N. Scottsdale Road, Ste 320 Scottsdale, AZ 85253	\$5,000.00	\$5,000.00
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B <i>(If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A)</i>		\$17,500.00	\$40,000.00

CANDIDATE LOANS

SCHEDULE C

1.	Committee Name Yes on Question 5			2. ID # 80-0250906
3.	Report covering period from <u>October 15, 2008</u> thru <u>November 24, 2008</u>			
4.	LOANS MADE OR GUARANTEED BY CANDIDATE	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS FROM WHOM RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
b.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
c.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
d.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
e.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
f.	NAME, ADDRESS, CITY, STATE, AND ZIP			
	DESCRIPTION			
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		\$0.00	\$0.00

OTHER LOANS

SCHEDULE C1

1. Committee Name Yes on Question 52. ID # 80-02509063. Report covering period from October 15, 2008 thru November 24, 2008

4	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 (If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A)		\$0.00	\$0.00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Yes on Question 5

2. ID #

80-02509063. Report covering period from October 15, 2008thru November 24, 2008

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Comtec Printing 2219 E. University Drive Phoenix, AZ 85034	09/23/08	\$2,300.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage		
b.	NAME, ADDRESS, CITY, STATE AND ZIP Comtec Printing 2219 E University Drive Phoenix, AZ 85034	10/03/08	\$1,800.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage		
c.	NAME, ADDRESS, CITY, STATE AND ZIP Comtec Printing 2219 E. University Drive Phoenix, AZ 85034	10/14/08	\$1,800.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage		
d.	NAME, ADDRESS, CITY, STATE AND ZIP Comtec Printing 2219 E. University Drive Phoenix, AZ 85034	10/24/08	\$1,600.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Postage		
e.	NAME, ADDRESS, CITY, STATE AND ZIP Rose & Allyn 7144 E. Stetson Drive Scottsdale, Az 85251	10/09/08	\$6,000.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing & Study Survey		
f.	NAME, ADDRESS, CITY, STATE AND ZIP Melanie Wilke Graphic Design 3503 S. Elm St. Tempe, Az 85282	10/09/08	\$2,500.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Web Site Design		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Yes on Question 5

2. ID #

80-02509063. Report covering period from October 15, 2008thru November 24, 2008

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP 1st Impression 43392 W. Wallner Dr. Maricopa, AZ 85239	10/20/08	\$1,911.36
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing - Signs		
b.	NAME, ADDRESS, CITY, STATE AND ZIP 85239.com P.O. Box 1018 Maricopa, AZ 85239	10/14/08	\$2,200.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing - Magazine Ad		
c.	NAME, ADDRESS, CITY, STATE AND ZIP Rose & Allyn 7144 E. Stetson Drive Scottsdale, AZ 85251	10/23/08	\$9,226.90
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing		
d.	NAME, ADDRESS, CITY, STATE AND ZIP Rose & Allyn 7144 E. Stetson Drive Scottsdale, AZ 85251	11/12/08	\$10,065.12
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing		
e.	NAME, ADDRESS, CITY, STATE AND ZIP Province Community Association, Inc. 20942 N. Province Parkway Maricopa, AZ 85238	11/06/08	\$16.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Other - Meeting Coffee		
f.	NAME, ADDRESS, CITY, STATE AND ZIP Anderson Farms 17380 N. Murphy Maricopa, AZ 85239	11/06/08	\$405.51
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Sign Posts		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Yes on Question 5

2. ID #

80-02509063. Report covering period from October 15, 2008thru November 24, 2008

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP Cecilia Estrada Ashe Great Western Bank 19756 N. John Wayne Pkwy Meriden, AZ 85220 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Appreciation Awards	11/24/08	\$200.11
b.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
c.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		\$405.51
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		\$40,025.00

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

Page 3 of 3

Column A \$ 23,425.00
 Column B \$ 40,025.00

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name Yes on Question 5

2. ID #

80-0250906

3. Report covering period from October 15, 2008 thru November 24, 2008

4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]		\$0.00

*SEE A.R.S. § 16-901(14).

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.


Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name Yes on Question 5

2. ID #

80-0250906

3. Report covering period from October 15, 2008

thru November 24, 2008

4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]		\$0.00

OFFSETS TO OPERATING EXPENSES *

SCHEDULE **D-3**

1. Committee Name Yes on Question 5

2. ID # 80-025-0906

3. Report covering period from October 15, 2008 thru November 24, 2008

REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A]			\$0.00
* Includes return of contributions made by reporting committee			

REPAYMENT OF CANDIDATE LOANS

SCHEDULE **D-4**

1. Committee Name Yes on Question 5

2. ID #
80-0250906

3. Report covering period from October 15, 2004 thru November 24, 2008

REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]			

REPAYMENT OF ALL OTHER LOANS

SCHEDULE **D-5**

Yes on Question 5

2. ID #
80-0250906

1. Committee Name _____

3. Report covering period from October 15, 2008 thru November 24, 2008

4	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Yes on Question 5		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		\$0.00

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name Yes on Question 5

2. ID #
80-0250906

3. Report covering period from October 15, 2008 thru November 24, 2008

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]			\$0.00

ANY OTHER DISBURSEMENT

SCHEDULE **D-7**

1. Committee Name Yes on Question 5

2. ID # 80-0250906

3. Report covering period from October 15, 2008 thru November 24, 2008

ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE: DESCRIPTION			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (Transfer total to Detailed Summary Page Line 15 Column A)			\$0.00

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Yes on Question 52. ID # 80-02509063. Report covering period from October 15, 2008 thru November 24, 2008

4	IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN				
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Kelly Anderson 17380 N. Murphy Maricopa, AZ 85239	CONTRIBUTION <input checked="" type="checkbox"/> * EXPENDITURE <input checked="" type="checkbox"/> *	09/15/08	\$100.00
DESCRIPTION Space Rental - Founders Day				
OCCUPATION Farmer	EMPLOYER Self Employed			
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Kelly Anderson 17380 N. Murphy Maricopa, AZ 85239	CONTRIBUTION <input checked="" type="checkbox"/> * EXPENDITURE <input checked="" type="checkbox"/> *	10/10/08	\$372.77
DESCRIPTION Founders Day Banner				
OCCUPATION Farmer	EMPLOYER Self Employed			
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Kelly Anderson 17380 N. Murphy Maricopa, AZ 85239	CONTRIBUTION <input checked="" type="checkbox"/> * EXPENDITURE <input checked="" type="checkbox"/> *	10/10/08	\$180.66
DESCRIPTION Yes on 5 Pins				
OCCUPATION Farmer	EMPLOYER Self Employed			
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Cecilia Estrada Ashe 18950 N. Alicante St Maricopa, AZ 85239	CONTRIBUTION <input checked="" type="checkbox"/> * EXPENDITURE <input checked="" type="checkbox"/> *	10/03/08	\$96.00
DESCRIPTION Tee-Shirts				
OCCUPATION Bank Manager	EMPLOYER Great Western Bank			
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]			
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]			

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name Yes on Question 5

2. ID #

80-025090C3. Report covering period from October 15, 2008 thru November 24, 2008

4	IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN			
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Myron Trafelet 42825 W. Whispering Wind Ln Maricopa, AZ 85238	CONTRIBUTION <input checked="" type="checkbox"/> * EXPENDITURE <input checked="" type="checkbox"/> *	10/26/08	\$150.00
	DESCRIPTION Space Rental - Province Meeting			
	OCCUPATION Accountant	EMPLOYER Self Employed		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION * * EXPENDITURE * *		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION * * EXPENDITURE * *		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION * * EXPENDITURE * *		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E. [If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]			\$899.43
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E. [If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]			\$899.43

Page 2 of 2

Column A \$ 150.00
Column B \$ 899.43

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE **F-1**

1. Committee Name Yes on Question 5

2. ID # 80-0250906

3. Report covering period from October 15, 2008 thru November 24, 2008

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# 80-0250906		
	DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 (If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A)			\$0.00

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

1. Committee Name Yes on Question 5

2. ID #
80-0250906

3. Report covering period from October 15, 2008 thru November 24, 2008

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]

\$0.00

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name Yes on Question 5

2. ID #

88-0250906

3. Report covering period from October 15, 2008

thru November 24, 2008

4	DEBTS AND OBLIGATIONS	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED				
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
	DESCRIPTION OF DEBT				
5.	ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [Transfer total to Detail Summary Page Line 19, Column A]				\$0.00